

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

10642268

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	
1	1							51					
2		1						52					
3								53					
4		3						54					
5	1							55					
6		1						56					
7		1						57					
8		1						58					
9		1						59					
10		2						60					
11		1						61					
12		1						62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
19								69					
20								70					
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40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	2							TOTAL IND.					
TOTAL DEP.	13							TOTAL DEP.					
TOTAL CLAIMS	15							TOTAL CLAIMS					